## FILE ON OR REFORE DECEMBER 31 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVOC		Y FEE		-			
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS		į	FILED 98 DEC 11 AM 10: 27			
1. Name of Limited Partnership	1a. DOCUMENT # A27400			SECRETARI, O'STATE TALLAHASSEE, FLORIDA			
2250 GLADES ROAD LTD.							
Mailing Address	Principat Office Address		•	3. Date Formed or Registered	5a. Capita	5a. Capital Contributions as Shown on record.	
% GERALD W. GRITTER, ESQ.	% GERALD W. GRITTER, ESQ.			11/17/1988	\$792,000.00		
100 NORTHEAST THIRD AVE., SUITE 1100 FT. LAUDERDALE FL 33301	100 NORTHEAST THIRD AVE., SUITE 1100 FT. LAUDERDALE FL 33301			3a. Date of Last Report 12/30/1997			
				4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 59-2315312	'	Applied For Not Applicable	
City & State	City & State			7. Certificate of Status Desired	X	\$8.75 Additional	
Zip Country	Zip Country			Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information)			
		<del>-</del>				<u>-</u>	
9 Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
EMO CORPORATE SERVICES, INC.		Name					
100 N.E. THIRD AVENUE, SUITE 1100		Street Address (P.O. Box Number is Not Acceptable)					
FT. LAUDERDALE FL 33301		Suite, Apt. #, etc.					
		City	City FI Zip Code				
10a. Pursuant to the provisions of sections 520.1051 and 62 for the purpose of changing its registered office or regis agent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	tered agent, or both, in the State of Florid	I ilmited partners a. Such change	ship organi: was autho	zed or registered under the laws of the rized by its general partner(s). I hereby	State of Florid accept the ap	la, submits this statement opointment of registered	
A GENERAL PARTNER THAT IS				NERSHIP OR OTHE	R BUSI	NESS ENTITY	
	BE REGISTERED AND  Address of Each General	Post-or				Registration/	
11. Name(s) of General Pariner(s)	11a. (Do NOT Use Post Office Box		11b.	City, State & Zip Code	11c.	Document Number	
DANCU HOLDING, INC.	16 NE 4TH ST			FT. LAUDERDALE FL 333		P96000041990	
		)					

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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K), Floride Statutes, I release the Division of Corporations from any liability of hon-compliance with Section 119.07(3)(K) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and/accurate and that my explanature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this,

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form

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